The Influence of Knowledge, Attitude and Behavior of Clean and Healthy Living on Toddler Families in the Working Area of Enarotali Community Health Center, Paniai Regency

Dolianci Pigai [1], Nur Susan Iriyanti Ibrahim[2], Bau Kanang [3]
[1,2,3] Nutrition Study Program, Sekolah Tinggi Ilmu Kesehatan Persada Nabire,
Papua, Indonesia
Correspondence Autor : doliancipigai03@gmail.com

Abstract Background: The direct cause of eating problems in infants is a mismatch between the amount of food that can be digested and the amount of food needed by the baby's body. This may lead to malnutrition and various diseases such as malnutrition and childhood obesity. In addition, illness is also a direct cause of eating problems because the child becomes less hungry to eat.In the Enarotali Health Center Working Area, there are 96 people suffering from malnutrition; toddlers suffering from malnutrition; and the number of toddler families implementing PHBS is 98.3%. Objectives:To find out whether knowledge about cleanliness and health (PHBS) influences the nutritional status of toddlers.in the Enarotali Health Center Working Area, Paniai Regency. Method:The study was conducted using a cross-sectional study approach, in the Enarotali Health Center Working Area, Paniai Regency from April 1 to June 1, 2024. The sampling method used Accidental Sampling, namely 80 toddlers. This research instrument used a questionnaire and anthropometric tools. Data processing was carried out using the SPSS version 16 application. Results: The chi-square test showed that there was an influence of knowledge awareness of cleanliness and hygiene with the nutritional status of toddlers, namely the p-value (0.00) <0.05, attitudes, hygiene behavior and healthy lifestyles with the nutritional status of toddlers had a p-value (0.00) <0.05 and PHBS actions and nutritional status of toddlers had a p-value (0.00). Conclusion: There is an influence between knowledge, attitudes, and PHBS behavior on the nutritional status of toddlers. Suggestion: Mothers who have toddlers should continue to bring their young children to the integrated health post every month. So that if health problems are found in toddlers, they can be treated early.

Keywords:Toddlers, PHBS , Nutritional Status

1. INTRODUCTION

Childhood or what is often called the golden age is a period of very rapid growth and development. During this period, children develop their thinking, speaking, five senses, and motor skills (Kartika and Rifqi, 2021).Infancy is a time when children experience their greatest growth and development. The period of growth and development this year is a period of rapid growth and cannot be repeated, so the period of development in infants is called the golden age (Ministry of Health of the Republic of Indonesia, 2019).

Clean and Healthy Living Behavior (PHBS) is a social technology program that aims to involve many members of society in change activities to improve the quality of daily behavior towards the goal of clean and healthy living. Efforts are made in the form of education and approaches to religious figures or community leaders, carried out to understand health problems in the area so as to create a safe and strengthening atmosphere for the community, especially for improving family life (Krisdayanti*et al*., 2021).

If introducing Clean and Healthy Living Behavior (PHBS) is deeply rooted in the household, it will certainly maintain security and reduce family health problems. The benefits of Clean and Healthy Living Behavior (PHBS) in the family allow each family member to

improve their quality of life without getting sick easily, a healthy family can increase family productivity and for other benefits of clean living behavior (Ministry of Social Affairs of the Republic of Indonesia, 2020).

According to the World Health Organization (WHO), in 2017 around 196 million children under the age of 5 experienced nutritional problems, such as undernutrition and overnutrition. Approximately 45% of children under the age of 5 died due to malnutrition. Malnutrition is widespread in low-income countries such as India, Bangladesh, Pakistan, and Nigeria and others. At the same time, overnutrition and undernutrition occur in both developed and developing countries.

Based on data from the Indonesian Ministry of Health (2018), it is explained that not all households (60%) in Indonesia implement Clean and Healthy Living Behavior (PHBS). Papua Province is ranked first for the worst PHBS, which is around 75.6% of households and Nabire Region with around 66.4% of homes not implementingclean and healthy living practicesis a health principle recommended by (PHBS) (Indonesian Ministry of Health, 2019).

Based on the results of Riskesdas Data (2018), the implementation of clean and healthy living behavior among Indian society needs to be improved. From the data, it can be seen that only 1.7% of children brush their teeth properly. In addition, 0.5% of children use active tobacco every day, and another 0.9% smoke occasionally. Based on other information regarding cleanliness and living conditions(PHBS) of the general public, including elderly children, recorded 82.6% of the population defecating properly. Only 47% of Indonesians can wash their hands properly using soap and running water. Around 26.1 percent of the population in Indonesia is categorized as poor. The behavior of Indonesian people up to 77.3% consumes sweets (Bur & Septiyanti, 2020).

Data from the Papua Provincial Health Service shows that the total number of toddlers in Papua in 2018 was 226,040 toddlers, consisting of 3.5% toddlers with poor nutritional status, 11.3% infants with undernutrition, 1.6% infants with overnutrition, and 83.5% infants with good nutritional status.

Based on datafrom the Paniai District Health Office throughout the period from January to December 2023 and January 2024, 788 cases of malnutrition and 1,238 cases of undernutrition were recorded in Paniai District. The number of cases has the potential to increase because not all health centers have reported the nutritional status of children to the District Health Office (Paniai District Health Office 2023 and 2024).

Based on information received from the Enarotali Health Center, it shows that many families have toddlers who practice clean and healthy living behaviors (PHBS) as many as 118 with a percentage of 98.3% of toddlers, and 98 toddlers suffer from malnutrition and 65 toddlers who experience stunted growth and 86 babies suffer from malnutrition (Enarotali Health Center, 2023).

The direct cause of eating problems in infants is a mismatch between the amount of food that can be digested and the amount of food the baby's body needs. This can lead to malnutrition and various diseases such as malnutrition and obesity in childhood. In addition, infectious diseases are also a direct factor causing nutritional problems because children consume less food (the amount of intake is reduced).

Cleanliness and health in the family is an effort to strengthen the family in terms of knowledge, willingness and ability to implement clean and healthy behavior and participate in health programs in the community.Healthy and clean housing infrastructureincludes delivery services by health workers, giving babies only breast milk until the age of 6 months, weighing babies regularly at the integrated health post, using clean water, washing hands with clean water and soap, using clean toilets and avoiding mosquitoes. Eradicating worms, eating fruits and vegetables every day, exercising regularly, and not smoking indoors. And throwing garbage in its place.

After seeing the description of the theory and existing data, the author therefore considers it important to conduct research with the title The Influence of Knowledge, Attitudes, and Clean and Healthy Living Behavior on Toddler Families at the Enarotali Health Center, Paniai Regency.

2. METHOD

The type of research used in this study is quantitative research with a cross-sectional study approach with the aim of finding outKnowledge, Attitudes, and Behavior of Clean and Healthy Living in Toddler Familiesin the Enarotalin Health Center Working Area, Paniai Regency, this can be seen at the same time (Hedayat, 2014).

This research will be conducted in the Enarotali Health Center Working Area, Paniai Regency.for 3 months, namely from April to June 2024. The population studied in this study were all mothers who had children aged 0 to 59 months (toddlers) totaling 370 people in the Enarotali Health Center Working Area, Paniai Regency with a sample size of 79 respondents. The instrument used in this study was a questionnaire given by the researcher. The types of data used were primary data and secondary data.

To test whether there is a relationship between the dependent variable and the independent variable, this analysis uses a two-variable chi-square statistical test, the level of significance used is 0.05 and the dependent variable as a variable if <0.05 p-value.

3. RESULTS AND DISCUSSION

Research result

Location Overview

a. Geographical Conditions

This research was conducted at the Enarotali Health Center, Paniai Regency, Central Papua Province. The research was carried out for 2 months starting from March to April 2024.

Enarotali Health Center is located in Paniai Regency, with a geographical location that has a mountainous area with a relatively high humidity temperature, resulting in high rainfall, while the valley morphology unit is located around Lake Paniai. The weather and climate in the Enarotali Health Center work area are type A, this area is very humid with rainfall between 2500 and 4000 mm per year. The air temperature in the valleys and valleys ranges from 270 to 340 degrees Celsius, in mountainous areas the air temperature is influenced by altitude, every 100 meters above sea level there is an average decrease in air temperature of 0.600 degrees Celsius. For areas around the lake, the temperature varies between 100 to 300 degrees Celsius.

Enarotali Health Center is located in Paniai Regency, which borders the Yatamo Epouto District to the north, the Yagai District, Kebo District and Aweida District to the south, the Muye District, West Paniai District and Ukawo District, and the Bibida District to the west. The population based on the 2023 village population data is known that the population in the Enarotali Health Center work area is 17,692 people.

b. Respondent Characteristics

Respondent characteristics are criteria applied to research subjects to be specifically interested in the research. Respondent characteristics in this study include maternal education, age, gender and status of toddlers at the Enarotali Health Center which can be seen in the research results data table.

Univariate Analysis

The purpose of univariate analysis is to explain or describe the characteristics of each research variable. In general, this analysis itself produces a frequency distribution and percentage of each variable (Notoatmodjo, 2018).

1. Age of Mother of Toddler

    Age of mother of toddler According to the Big Indonesian Dictionary (KBBI) is the length of time or period of life (from birth to the end of this world). It is used to find out the difference in age of mothers and toddlers who are respondents in this study. Below, the researcher explains the age of mothers who have toddlers in the Enarotali Health Center Work Area, Paniai Regency.

    Table 1. Frequency Distribution of Age of Mothers of Toddlers in the
    Working Area of Enarotali Health Center, Paniai Regency

Age of Mother of Toddler	f	%
17-30 Years	54	67.5
31-60 Years	26	32.5
Total	**80**	**100.0**

    Source: primary data 2024

    According to table 1. this shows that 80 respondents studied with the highest age category of mothers of toddlers, namely 17-30 years, amounted to 54 people (67.5%), while the lowest was the age of mothers of toddlers 31-60 years, namely 26 people (32.5%).

2. Mother's Job

    A job is a position of a person who meets the requirements to do a job or business according to their abilities and skills (BPS 2019). The actions of mothers who have toddlers are closely related to the role of mothers as caregivers and caregivers of toddlers for healthy growth and development.The following is a description of the types of work of mothers of toddlers in the Enarotali Health Center Work Area, Paniai Regency.

    Table 2.DistributionFrequency of Employment of Mothers of Toddlers in the
    Working Area of the Enarotali Health Center, Paniai Regency

Work	f	%
Private	8	10.0
Honorary	8	10.0
Farmer	28	35.0
housewife	36	45.0
Amount	**80**	**100.0**

    Primary data sources 2024

    Based on table 2. shows that 80 respondents are mothers of toddlers, and this is a very high number of housewives with 36 people or (45.0%), farmers with 28 people (35.0%)

and the lowest is mothers of toddlers who have honorary jobs with 8 people (10.0%) and private jobs with 8 people (10.0%).

3. Mother's Education

Researchers hypothesize that this education affects the Nutritional Status of Toddlers. Educated mothers of babies have good nutritional status because it affects the mother's knowledge and motivation in preparing healthy food (Utami, 2018).

Table 3.Distribution of Respondent Frequency Based on Mother's Education Level

Level of education	f	%
No school	26	32.5
SD	14	17.5
JUNIOR HIGH SCHOOL	12	15.0
High School/Vocational School	18	22.5
College	10	12.5
Total 80 100.0		

Source: primary data 2024

Based on table 3. this shows that the highest majority of respondents who are uneducated are 26 people or 32.5%, the lowest level of education is junior high school education of 12 people or 15%, elementary school education of 14 people or 17.5%, high school/vocational school education of 18 people or 22.5% and college education of 10 people or 12.5%.

4. Toddler Age

Children under five years of age or toddlers are in a period of growth and development of children, this basic development period is related to the development of language, creativity, social intelligence, emotions and intelligence, this is what is meant by the period of growth and development of children. Beginning, further development (Saidah & Dewi, 2020).

Toddlers are identified by experts as a stage of growth and development of children who are very vulnerable to disease, including diseases caused by deficiencies or excesses of certain types of food. Toddlers are divided into three age groups: infants (0-2 years), toddlers (2-3 years), and children (above 3-5 years) (Merryana Adriani, et al., 2017).

Table 4. Frequency Distribution Table based on Toddler Age

Toddler Age	f	%
0-6 months	10	12.5
7-12 months	40	50.0
13- 24 months	20	25.0
25-36 months	10	12.5
Total 80 100.0		

Primary data sources 2024

Based on table 4, it shows that the highest number of toddlers is 7-12 months old with 40 babies or 50%, 13-24 months old with 20 people or 25%, while the lowest number is 0-6 months old with 10 babies or 12.5% and 25-36 months old with 10 babies or 12.5%.

5. Toddler Gender

According to Cristian (2017), gender is a term used to describe racial and cultural differences between men and women. These differences indicate that the emotional and psychological aspects are social conditions that men and women behave differently in different places and times. For example, women are seen as gentle, beautiful, emotional, and motherly, while men are seen as strong, logical, masculine, and strong. These characteristics are traits that can be exchanged between men and women and cause problems between men and women.

Table 5 Frequency Distribution Based on Toddler Gender

Gender	f	%
Man	38	47.5
Woman	42	52.5
Total	**80**	**100**

Source: primary data 2024

Based on 5, it shows that the gender of the toddlers is 38 girls (47.5%) and the gender of the toddlers is 42 boys, which is (52.5%).

6. Toddler Nutritional Status based on BB/A

Nutritional status based on the weight-for-age index (BW/A) indicates significant nutritional problems. This index does not indicate chronic or severe eating problems because weight is positively correlated with age and height. A low BW/A index can be caused by food intake (eating problems) or diarrhea or other infectious/communicable diseases (Ministry of Health of the Republic of Indonesia, 2017).

Table 6. Distribution of Frequency of Infant Nutritional Status Based on BB/A

Nutritional status	f	%
Good nutrition	24	30.0
Over nutrition	32	40.0
Malnutrition	20	25.0
Malnutrition	4	5.0
Total 80 100.0		

Source: primary data 2024

Based on table 6, it shows that there are 24 toddlers (30.0%) with good nutritional status, 32 toddlers (40.0%) with excess nutritional status, 20 toddlers (25.0%) with less nutritional status, and 4 toddlers (5.0%) with poor nutritional status.

7. PHBS Knowledge Distribution

Knowledge is the result of understanding that occurs after someone hears something. The method in question is observation through the five senses, although most human knowledge is obtainedthrough the eyes and ears. Notoatmodjo in Banun (2016).

Knowledge is the result of knowing that occurs when the five senses are involved with something related to what is wanted to be known. If both of these things do not have a purpose, then society will not be able to make decisions and choose and decide what to do about the problems they face (Carolina et al., 2016).

According to the Indonesian Ministry of Health (2017) as quoted by Lynawati (2020), Clean and Healthy Living Behavior (PHBS) is all healthy behavior carried out by each individual and group. In certain circumstances, family members can help themselves and have access to health facilities and participate in social activities and help other communities.

Table 7 Distribution of respondents' responses to PHBS knowledge

Clean and Healthy Living Behavior	Correct		Wrong	
Knowledge	f	%	f	%
How to understand child growth and development	41	51.2	39	48.7
Use clean water at home	55	68.7	25	31.2
The correct way to wash your hands	20	25.0	60	75.0
Benefits of eating fruit and vegetables every day	58	72.5	22	27.5

The importance of daily exercise	46	57.5	34	42.5
Understanding a healthy toilet or latrine	63	78.7	17	21.2
How to eradicate mosquito larvae in the house	49	61.2	31	38.7
The risks of smoking at home for family health	33	41.2	47	58.7

Primary data sources 2024

Based on table 7, it can be seen that health and hygiene behavior is related to knowledge, the majority of respondents answered correctly about the importance of toilets or toilet sanitation, and as many as 63 people or 78.7% answered correctly, and only a few did it correctly. To wash hands properly as many as 17 people or 21.2%.

PHBS is an effort to provide learning experiences, create different cultures for individuals, groups, families and communities by opening communication channels to exchange information in the form of knowledge to improve attitudes and behavior by using methods (Sulasmi et al., 2019).

Based on the results obtained, data related to the distribution of knowledge of cleanliness and health are presented in the following table:

Table 8 Distribution of PHBS Knowledge

PHBS Knowledge	Amount	
	f	%
Good	20	25.0
Not good	60	75.0
Total	80	100.0

Primary data sources 2024

Based on table 8, it can be seen that 20 people or 25.0% have good knowledge of cleanliness and health, and 60 people or 75.0% have poor knowledge of cleanliness and health.

8. Distribution of Respondents' Answers Regarding PHBS Attitudes

Attitude is a state of favor or disfavor towards a goal to be addressed. Attitude is essentially value-based and value-based regarding the concept of belief. Attitude is not a function or action, but work attitude is a behavior (Oktaningrum, 2018).

According to Provarawati and Rahmawati (2016), PHBS is a form of family life that cares about the health of all family members and maintains and tries to help themselves and others in the health sector.

Table 9 Distribution of respondents' responses to PHBS attitudes

Clean and Healthy Living Behavior	Agree		Don't agree	
Attitude	**f**	**%**	**f**	**%**
At the integrated health post, weighing babies is very important to monitor the child's growth and development.	65	81.2	15	18.7
Clean water is water that is colorless, clear and odorless.	72	90.0	8	10.0
There is no need to use soap to wash your hands.	51	63.7	29	36.2
Eating fruits and vegetables is not a must every day	49	61.2	31	38.7
Daily exercise is important for maintaining physical health.	52	65.0	28	35.0
Dirty toilets and WCs will prevent your family from getting sick.	50	62.5	30	37.5
To eradicate mosquito larvae, the best way to do it is to clean the toilet once.	46	57.5	34	42.5
Smoking smoke in the house can cause respiratory diseases in the family.	28	35.0	52	65.0

Primary data sources 2024

Based on table 9, it shows that of the 80 respondents who have a positive attitude towards 8 PHBS attitudes, most are on attitudes towards the practice of weighing toddlers at the integrated health post (81.2%) and clean water conditions (90%). Furthermore, for other criteria, the positive attitude value is still low, namely a value below 80%. Based on the results of the study, the distribution data on clean and healthy living behavior obtained in table 10 are as follows:

Table 10 Distribution of PHBS Attitudes

PHBS Attitude	Amount	
	f	**%**
Good	52	65.0
Not good	28	35.0
Total	**80**	**100.0**

Primary data sources 2024

Based on table 10, it can be seen that 52 people or 65.0% of respondents have good PHBS attitudes, while 28 people or 35.0% of respondents have poor PHBS attitudes.

9. Distribution of PHBS Actions

Action is anything that a person does to achieve a goal, usually a goal is achieved by thinking, to create a new or desired action (Oktaningrum, 2018).

Maintaining cleanliness and health is an action carried out by individuals, groups, and communities in a healthy manner to achieve good health, independence, and health development opportunities (Maryunani, 2017). PHBS empowers family members who know, are willing and able to carry out PHBS to maintain and improve health, prevent disease and protect against disease risks, and participate in community health programs (Maryunani, 2017).

Table 11 Distribution of Respondents' Responses to PHBS Actions

Clean and Healthy Living Behavior	Yes		No	
Action	f	%	f	%
Mothers weigh their children once a month at the posyandu	43	53.7	37	46.2
Mother uses clean water for washing, cooking, drinking for all family members.	47	58.7	33	41.2
Mother washes her child's hands with clean water and soap before and after eating.	42	52.5	38	47.5
Every day mother prepares fruit and vegetables for the family	57	71.2	23	28.7
The mother invites her child to play and study every day	41	51.2	39	48.7
Mother cleans the bathroom or toilet every day	64	80.0	16	20.0
The mother keeps the house clean from mosquito larvae	50	62.5	30	37.5
Mother forbids family members from smoking in the house	33	41.2	47	58.7

Primary data sources 2024

Based on Table 11, it can be seen that regarding health and hygiene behavior, most respondents are concerned about the disruption of clean water by mothers for washing, cooking and drinking family members as many as 72 people or 90.0%, and the least number of respondents. For mothers who are members, 28 family members smoke at home, amounting to 35.0%. Based on the results of the study, data related to clean and healthy living behavior in the table are as follows:

Table 12 Distribution of PHBS actions

PHBS Actions	Amount	
	f	%
Positive	72	90.0
Negative	8	10.0
Total	**80**	**100.0**

Primary data sources 2024

Based on Table 12, it can be seen that 72 people or 90.0% have positive clean and healthy living behaviors, while 8 people or 10.0% have negative clean and healthy living behaviors.

Bivariate Analysis

Bivariate analysis is an analysis carried out on two variables that are correlated or related (Notoatmodjo, 2018).

The influence of health awareness knowledge and healthy behavior (PHBS) on infant status at Enarotali Health Center in 2024

Knowledge about nutrition in the home environment means instilling habits or behaviors of clean and healthy living and encouraging the whole family to behave cleanly and be more aware of what their children need, especially the nutritional needs of their toddlers, not only mothers who participate in clean and healthy living behaviors and education about toddler nutrition, what their toddlers need, especially the nutritional needs of their toddlers. Healthy behavior is formed with the influence of knowledge and experience from individuals. People who have higher education have a better understanding of the importance of health. With this knowledge, people can make the environment healthier (Usman, Daud and Winarto, 2020). Based on the results of the study, the following data were obtained regarding the influence of knowledge of health awareness and healthy behavior (PHBS) on the condition of toddlers.

Table 13 The influence of PHBS knowledge on toddler nutritional status

in the Enarotali Health Center Working Area in 2024

PHBS Knowledge	Nutritional status of toddlers				Amount		P value
	Good		Not good				
	f	%	f	%	f	%	
Good	32	40.0	10	12.5	42	52.5	**0,000**
Not good	30	37.5	8	10.0	38	47.5	
Total 80 100.0							

Primary data sources 2024

Based on table 13 it can be seenthe influence of health awareness knowledge and healthy behavior (PHBS) with toddler status, the chi-square test was used to analyze and obtained a p-value (0.00). This shows that the p-value (0.00) <0.05. This means that there is a significant influence between health awareness knowledge and healthy behavior (PHBS) with infant status.

The influence of hygiene behavior and healthy lifestyle attitudes on infant nutritional status at the Enarotali Health Center in 2024.

Attitude is a tendency for someone to take action to support the relationship between attitude and implementation of PHBS (Chandra, Fauzan and Aquarista, 2017). The indicator is known that awareness of clean and healthy living for toddler families is still lacking and they do not understand the importance of clean and healthy living. Based on the results of the study, data was obtained regarding the influence of hygiene behavior, and healthy living attitudes, on the nutritional status of toddlers.

Table 14 The Influence of PHBS Attitudes on Nutritional Status of Toddlers
in the Enarotali Health Center Work Area in 2024

PHBS Attitude	Infant nutritional status				Amount		p value
	Good		Not good				
	F	%	f	%	f	%	
Positive	20	25.0	12	15.0	32	60.0	**0,000**
Negative	28	35.0	20	25.0	48	40.0	
Total 80 100							

Primary data sources 2024

Based on table 14, the influence of hygiene behavior and healthy lifestyle attitudes on toddler nutritional status is analyzed using the chi-square test with a p-value (0.00). This shows that the p-value (0.00) <0.05. This means that there is a significant influence between hygiene behavior and healthy lifestyle attitudes on toddler nutritional status.

The influence of hygiene behavior and healthy lifestyle on infant feeding status at Enarotali Health Center in 2024

Clean and healthy living behavior is all health behavior that is carried out consciously so that family members can help themselves in the health sector and play an active role in habits at home and in the community, with families who have clean and healthy living behavior in their residential environment will help family members participate in national priority activity programs in the field of alert villages in Bantul Regency, one of which is a village free from malnutrition (Bantul Health Office, 2019), with a clean and healthy

lifestyle, families will become healthy families and avoid various diseases, especially in toddlers, they will avoid malnutrition because the quality of the food provided is guaranteed to be good and healthy by implementing clean and healthy living behavior. Based on research findings, data on the influence of hygiene behavior and healthy lifestyles and the nutritional status of toddlers are as follows:

Table 15. The Influence of PHBS Actions on the Nutritional Status of Toddlers in Enarotali Health Center in 2024

PHBS Actions	Toddler Nutritional Status				Amount		*pvAlue*
	Good		Not good				
	f	%	f	%	f	%	
Positive	31	38.7	13	16.2	44	55.0	**0,000**
Negative	25	31.2	11	13.7	36	45.0	
Total 80 100							

Primary data sources 2024

Based on table 15, it can be seen that the influence of hygiene behavior and healthy lifestyle with the status of toddler feeding is analyzed using the chi-square test, the p-value is (0.00). This shows that the p-value (0.00) <0.05. This means that there is a significant influence between clean and healthy living behavior (PHBS) and infant nutritional status.

Discussion

The Influence of Knowledge of Clean and Healthy Living Behavior (PHBS) on Infant Statusin the Enarotali Health Center Working Area, Paniai Regency

Clean and Healthy Living (PHBS) awareness knowledge is the result of informed and conscious actions that improve one's own health status and participate in community health activities. Healthy and Healthy Living Behavior (PHBS) is an effort to provide learning experiences and methods for individuals, families, groups, and communities. By opening channels of communication, information and knowledge and improving knowledge, attitudes and practices. This study investigated the relationship between knowledge of health awareness and healthy behavior (PHBS) with the condition of toddlers analyzed using the chi-square test with a p-value of 0.00. This shows a p-value of 0.00> 0.05. It can be concluded that there is a significant relationship between knowledge of clean and healthy living awareness and nutritional status in early childhood.

Healthy and Healthy Living Behavior (PHBS) is an effort to provide learning experiences and methods for individuals, families, groups, and communities. By opening

channels of communication, information and training to improve knowledge, attitudes and practices.

The results of the study on the relationship between knowledge of awareness of clean living behavior with health status and nutritional status of toddlers were analyzed using the chi-square test with a p-value of 0.00. This shows a p-value of 0.00> 0.05. It can be concluded that there is a significant relationship between knowledge of awareness of clean and healthy living with nutritional status in early childhood.

This study is in accordance with Syifah's study (2019) entitled "The Relationship Between Clean and Healthy Living Behavior and the Nutritional Status of Early Childhood" this shows that there is a relationship between knowledge about clean and healthy living behavior and the nutritional status of toddlers that there is a Relationship Between Nutritional Status Study of the Existence of His childhood was spent in Sumurgung Village, Tuban Regency. This study is not in accordance with the theory of individual or community knowledge about health behavior put forward by Budiman (2017).

Knowledge is an important factor in changing health behavior, public knowledge about health is very important before healthy behavior occurs, so that health will occur if the community is motivated to act based on their knowledge (Maryunani, 2019). Mothers who are well informed about clean and healthy living behavior (PHBS) will have more opportunities to improve their health so that they become more active in preventing diarrhea in toddlers. Currently, mothers who have less knowledge need more attention, because sometimes access to health information does not reach mothers, for example by spreading messages, strengthening self-confidence, so that the person concerned does not know, understand and understand, but requests and desires. The person can apply methods related to preventive behavior (Maryunani, 2019).

Based onresearcher assumption, differences in knowledge about behavioral patterns related to clean and healthy living will affect the nutritional status of early childhood. A mother's awareness of cleanliness and healthy living patterns can help prevent unhealthy eating habits in children, where mothers know how to maintain healthy and healthy behavior at all times in the family environment to protect children from various diseases and nutritional disorders and children's health. Children's health is the number one priority maintaining children's health is the most important thing that every parent can do is for the growth and development of their children. If the child is healthy, their growth and development are very good, then the child will be able to carry out daily activities. The higher the education, the more knowledge increases, the more knowledge increases, so that there is

an influence of knowledge on cleanliness and health in this study due to other factors that were not found in this study: For example, educational background, economic status, culture and tradition, and many other things that are outside the scope of this study. In addition, the survey also found that many respondents misunderstood the correct way to wash their hands to maintain a clean and healthy lifestyle. Because mothers do not know the correct way to wash their hands, mothers should be advised to wash their hands properly.

Cleanliness and health are a reflection of family life that always pays attention to and maintains the health of all family members. The purpose of the PHBS program is to improve the quality of health through intelligent actions that initiate community participation in healthy and clean daily life (Ministry of Health of the Republic of Indonesia, 2019). The study examined nine PHBS indicators, namely independent breastfeeding (ASI), weighing babies every month, using clean water, washing hands with clean water and soap. In addition, also knowing the rules for using a healthy toilet (preventing open attitudes/preventing defecation), eradicating mosquito larvae, eating fruits and vegetables, exercising every day, stopping smoking in the house.

The Influence of Clean and Healthy Living Behavior (PHBS) on Toddler Nutritional Status in the Work Area Enarotali Health Center, Paniai Regency

Attitude towards hygiene and health is a person's reaction or response to health behavior, hygiene and health behavior to maintain, prevent, protect yourself and your family from various health risks by calling with knowledge to ensure family welfare.

The results of the study on the relationship between cleanliness attitudes and healthy lifestyles and nutritional status of toddlers were analyzed using the chi-square test and a p-value of 0.00. This shows that the value of p-value 0.00. <0.05. Therefore, we can conclude that there is a significant relationship between cleanliness attitudes and healthy behaviors on the health and nutritional status of early childhood.

Attitude is an opinion that supports (positive) or does not support (negative) the topic being discussed. Attitude is an attitude that is related to a belief system. An attitude is not a function or an action, but an attitude is a context for carrying out a behavior (Oktaningrum, 2018)

Attitude is a response or response to a person's attachment to a stimulus or object. Attitude is not a function or action, but rather a behavioral force. If new behavior is based on knowledge, understanding and positive attitudes, then its acceptance will be easier. Attitude was originally defined as the way an action occurs. Attitude is a mental process, assessing,

forming opinions, expressing emotions, determining behavioral patterns in relation to the things we experience (Maryunani, 2019).

The results of the study showed that the relationship between hygiene behavior and the health and nutritional status of infants was analyzed using the chi-square test with a p-value of 0.01. This shows a p-value of 0.01 <0.05. Therefore, it can be concluded that there is a significant relationship between hygiene and healthy behavior on the health status and nutritional status of early childhood.

This is in accordance with Notoadmojo's theory (2017) which states that reactions are an important measure of a person's health behavior. Reactions related to a person's health behavior can have serious health impacts, energy and food security for themselves and their families.

This study is not in line with Krisnana's (2019) research on the relationship between maternal health behavior and toddler malnutrition, where mothers tend to behave healthily which is significantly related to malnutrition in toddlers in Genteng District, Banyuwangi Regency.

Based on the researcher's assumption, the maternal hygiene and health index is related to the nutritional status of toddlers. Attitude is a reaction or response that reflects the mother's behavior in maintaining the nutritional status of her toddler. The better the mother's perception of cleanliness and health, the better the child's eating habits, and the worse the mother's perception of cleanliness and health, the worse the child's eating patterns. A child's nutritional status is an expression or description of a person's eating patterns based on certain variables. The nutritional index is a number that is interpreted using certain criteria to determine nutritional status, whether it is more, good, less, or bad.

Newcomb said that attitude is the willingness and desire to do something. In other words, an attitude is not a reaction or action, but rather is under a behavior (action) or closed reaction (Kholid, 2018). Attitude is a person's closed response to a stimulus or object, including relevant thoughts and emotional states (pleasure-disagreement, agreement-disagreement, positive-negative). Attitude is translated into action. Good attitudes and good knowledge will give birth to good attitudes (Kholid, 2018).

In addition, when respondents were asked about how to live a clean and healthy life, the study found that most respondents said they did not think smoking was bad in the baby's environment and could cause upper respiratory tract infections, but many people do not know that, therefore, it is not uncommon for many families to smoke inside the house.

The results of the study showed that the relationship between attitudes towards clean and healthy living behavior (PHBS) and the nutritional status of infants in Sidorejo Lendah Village, Kulon Progo, Yogyakarta, was determined using statistical tests and Kendall's test to determine p-value ≤ 0.05. Therefore, it can be concluded that there is a significant relationship between attitudes towards clean and healthy living behavior (PHBS) and the nutritional status of toddlers in Sidorejo Lendah Village, Kulon Progo, Yogyakarta.

The results of this study are in line with Safrina (2018) who stated in her study that there is a relationship between cleanliness attitudes with healthy living and the nutritional status of early childhood. Lack of sanitation and hygiene also weakens the nutritional status of children, because the implementation of PHBS positively affects children's eating habits. The point is the application of 10 PHBS indicators in the structure of the house so that families, especially mothers, can have better family health.

Based on the results of the study in Sidorejo Village, the cleanliness and health carried out by respondents were very good, such as giving birth with the help of health workers, cleanliness of equipment when giving birth to mothers and assistance. From health workers. to be safe, clean and tidy, free from disease and other problems. This is in line with the Ministry of Health (2021) which states that childbirth assisted by professional health workers such as doctors, midwives, and pharmacists have standards for the use of clean, sanitary and safe equipment, this step will help prevent disease and prevent other hazards that cause harm to the safety of mothers and children.

Children's attitudes towards the implementation of PHBS in the school environment can be formed. Research conducted by Khoiriah and Latifah (2021) shows that children's attitudes in implementing PHBS in everyday life cannot be separated from the work of teachers at school. Teachers can develop an attitude of caring about PHBS in providing education with various methods, such as instructions, demonstrations, and others (Aswadirir, Delastara, and Surahmawati, 2017).

Attitude is a feeling, attitude, or set of beliefs about something as positive or negative (Stanhope & Lancaster, 2016).

The Influence of Clean and Healthy Living Behavior (PHBS) Practices on Toddler Nutritional Status in Working Area of Enarotali Health Center, Paniai Regency

Cleanliness and health actions are actions or activities carried out consciously and in accordance with a clean and healthy lifestyle with the aim of creating conditions for individuals, families and communities to develop through a clean and healthy lifestyle.

The results of the study on the relationship between hygiene behavior and clean and healthy lifestyles with infant nutritional status were analyzed using the chi-square test with a p-value of 0.00 <0.05, so it can be concluded that there is a significant relationship between hygiene behavior, clean and healthy lifestyles, and infant nutritional status.

This is in accordance with Krisna's research entitled "The relationship between healthy family behavior and unhealthy eating behavior in toddlers in Genteng Village, Banyuwangi Regency in 2018". It is true that the disease attacks a child. This study shows a coefficient value of 0.636, which means that there is a significant relationship between hygiene behavior and healthy lifestyles with malnutrition in early childhood.

Based on the researcher's assumption, the behavioral actions are healthy and purely related to the child's eating habits, because the activity is a reflection of its consequences, maternal and infant health practices affect the health and well-being of the baby. The better the cleanliness and hygiene of the house, the better the child's eating habits, and the worse the child's nutrition.

Action is anything that a person does to achieve a goal, usually a goal is achieved with intention, in order to create a new activity or a desired action (Oktaningrum, 2018).

In addition, in this study if we look at the results of clean and healthy living habits, respondents, this survey shows that there are still many mothers of toddlers who do not prohibit smoking in their family homes to smoke at home, upper respiratory tract infections in infants can be fatal if left untreated. disrupt the nutritional status of infants. Toddlers are very susceptible to disease, but smoking around children can cause disease and other diseases that will weaken and affect the health and nutrition of children.

Action or is a person's specific response or reaction to a stimulus or object. This response can be done, is in the mental part, or some do it based on what is known or answered. Carrying out health activities or behaviors after the person understands their health problems and provides advice on the cleanliness of the counselor's house is an internal response in the form of an attitude. In the following action, the subject does what he knows or is interested in (Anna Arta, 2018).

Actions are rules that build a close relationship between attitudes and actions supported by those attitudes, namely thoughts or feelings that accompany the desire to act. One effective way is environmental factors, namely the home environment, schools, hospitals, clinics, distance and other sources such as equipment and money.

Attitudes are also not translated into actions because the implementation of actions must be supported by other factors such as the availability of resources and infrastructure. In

practice, work is divided into 3 levels that can be seen according to its quality, namely supervised work, people who still work but still depend on supervisors, people who do something that already exists (Notoatmodjo, 2017).

4. CONCLUSION

Based on the results of research on the influence ofAttitudes and Clean Living Behavior in Toddler Familiesin the Enarotali Health Center Working Area, Paniai Regency, it can be concluded:

1. There is an influence of PHBS knowledge on the nutritional status of toddlers in the Enarotali Health Center Working Area, Paniai Regency with a p value = 0.00 (<0.05).
2. There is an influence of PHBS attitudes on the nutritional status of toddlers in the Enarotali Health Center Working Area, Paniai Regency with a p value = 0.00 (<0.05).
3. There is an influence of PHBS actions on the nutritional status of toddlers in the Enarotali Health Center Working Area, Paniai Regency with a p value = 0.00 (<0.05).

5. SUGGESTION

1. For the Paniai District Health Service

   It is recommended to the Paniai District Health Office to conduct monitoring, periodic checks to the Health Centers in their working areas. In order to know for sure about the condition of Clean and Healthy Living Behavior (PHBS) on the nutritional status of toddlers and to provide suggestions and appeals to the health centers in providing services to the community, especially toddlers.

2. For Enarotali Health Center

   Health workers should provide more counseling on clean and healthy living behavior (PHBS) to mothers, so that there are no nutritional problems in the work area of the Enarotali Health Center, Paniai Regency.

3. For Toddler Mothers

   Mothers of toddlers should routinely check their toddlers at the integrated health post, so that the health condition and nutritional status of their toddlers can be controlled. So that if a health problem is found in toddlers, it can be treated early.

4. For the Community

   It is hoped that people will pay more attention to clean and healthy living behavior, in order to avoid various disease problems.

5. For Institutions

It is hoped that this research can be used as reading material for further researchers and as reference material for the library at STIKes Persada Nabire.

6. BIBLIOGRAPHY

Aswadirir, D., Delastara, & Surahmawati. (2017). Clean and healthy living behavior (PHBS) in students of SDK Rita in Kota Komba sub-district, East Manggarai Regency, East Nusa Tenggara Province. *Public Health Sci. J.*

Central Bureau of Statistics. (2019). Main job taking care of the household. Central Jakarta, East Tanjung Jabung Regency.

Ermalena. (2015). SDGs health indicators in Indonesia. *Balai Kartini*.

Irianto, K. (2014). Balanced nutrition in reproductive health. Bandung: Alf.

Julius, W. D., Zuraida, R., & Saftarina, F. (2014). The relationship between clean and healthy living behavior and health status with toddler nutritional status in poor households in Way Kanan Regency. *J Major, 3*.

Kartika, D., & Rifqi, M. (2021). The relationship between the use of Posyandu and nutritional status in toddlers aged 1-5 years in Indonesia: Literature review. *Jurnal Ilmiah Permas, 11*(4), 689-698. Available at: http://journal.stikeskendal.ac.id/index.php/PSKM.

Khasanah, Y. U. (2014). Knowledge, clean and healthy living behavior with nutritional status of toddlers. Bantul: Akbid Umi Khasanah.

Krisnana. (2017). The relationship between PHBS and malnutrition status in children in Genteng District, Banyuwangi Regency.

Kurniasari, A. D. (2017). The relationship between education level, occupation, and parental income with nutritional status of elementary school students of Hangtuah 6 Surabaya. *Journal of Sports and Health Education, 5*(2), 163–170.

Lynawati. (2020). The relationship between PHBS (clean and healthy living behavior) and stunting in Kedung Village, Malang, Banyumas Regency. *HUMMANSI Journal (Humanities, Management, Accounting), 3*, 41–46.

Maryunani, M. (2019). Understanding knowledge, attitudes, and behavior of clean and healthy living. Jakarta: Trans Info Media.

Merryana, A. S., & Wirjatmadi, B. (2016). Nutrition and health of toddlers: The role of micro zinc in toddler growth. In *KENCANA Prenada Media Group*.

Ministry of Health. (2021). Clean and healthy living behavior (PHBS) indicators in PIS - PK. Ministry of Health of the Republic of Indonesia.

Notoadjo. (2018). Health research methodology, univariate and bivariate analysis. Jakarta: Rineka Cipta.

Oktaningrum, I. (2018). The relationship between Siksp and mother's actions in providing healthy food with children's nutritional status at SD Negeri 1 Beteng, Magelang Regency, Central Java. *Thesis, 173*. Available at: https://core.ac.uk/download/pdf/185260623.pdf.

Rahmawati, A. P. (2016). PHBS: Clean and healthy living behavior. Yogyakarta: Muha Medika.

Safrina, D. (2018). The relationship between knowledge and attitude of housewives with PHBS in HUTA I Nagori Bandar Malela, Gunung Maligas District, Simalungun Regency. *Journal of Reproductive Health, 12*(22), 30-43.

Selviana, P., Putra, G. S., Suwarni, L., & Ruhama, U. (2018). Determinants of clean and healthy living behavior in Pontianak City. *Indonesian Public Health Publication Journal, 5*(2), 53–58.

Soedarsono, A. M., & Sumarmi, S. (2021). Factors of maternal education level towards toddlers in the Simomulyo Health Center work area, Surabaya. *Media Gizi Kesmas, 10*(2), 237-245.

Soetjipto. (2014). Healthy households with clean and healthy living behavior. Jakarta: Rineka Cipta.

Sulasmi, I., Dewi, S., A. C., & Karmila, M. (2019). Analysis of clean and healthy living behavior (PHBS) on motor skills of early childhood children at the Al Masyithoh Plamongansari preschool post. *Paudia: Journal of Research in the Field of Early Childhood Education, 7*(2), 85–95. https://doi.org/10.26877/paudia.v7i2.3271.

Usman, R., Daud, F., & Winarto, M. (2020). The relationship between socioeconomic status and clean and healthy living behavior (PHBS) of the community in Pajukukang Village, Maros Regency. *Biology Teaching and Learning, 3*, 15–23.

Utami, R. D. P., Nggadjo, F. X., & Murharyati, A. (2018). The relationship between education, work, and parents' economy with the nutritional status of preschool children's breasts. *Jurnal Care [Online Journal]*. Available at: https://doi.org/10.36569/jmm.v9i1.29.

World Health Organization (WHO). (2017). *Geneva: World Health Organization*.